

At-a-Glance Barriers to Medicaid Dental Care

1. Provider participation: Only 1-in-6 dentists participating in Medicaid receive \$10,000 or more in Medicaid payments per year. This indicates that few dentists participate substantially in the Medicaid program, making it difficult for enrollees to find a dentist who will accept Medicaid.
2. Reimbursement rates: The fees paid by the Medicaid program in many states do not meet the aggregate cost of delivering the dental services. Medicaid reimbursement rates to dentists range widely among states and typically are significantly lower than non-Medicaid payments.
3. Red tape: Complex enrollment forms, nonstandard billing forms, excessive prior authorization requirements, slow payments, inefficient eligibility determination, and other administrative problems can discourage dentist participation.
4. Broken appointments: According to the American Dental Association, one-third of Medicaid dental appointments result in “no shows.” Broken appointments are common and profoundly problematic for dentists, resulting in significant down time and a financial loss. For the families of Medicaid-eligible children, a lack of reliable transportation to the dental office, difficulties arranging for child care or leave from work, or a lack of familiarity with the common behavioral structures of the dental delivery system often lead to broken appointments.
5. Geographical barriers: The dentist-to-population ratio is declining as fewer dentists graduate and the population grows. Not only is there competition for patients to get appointments with the short supply of dentists, but there is competition among states and communities to keep dentists practicing in their locale. Rural and low-income neighborhoods have particular scarcity – 38% of rural counties in the U.S. have no dentist.
6. Personal behaviors: The families of Medicaid- and SCHIP-eligible children may not be familiar with the dental delivery system, making navigation of the system a challenge; they may not recognize the value of preventive dental care because of their own poor history of dental care; they may have inflexible workplaces that make it difficult to take time off to take their children to the dentist.
7. Medicaid managed care: About 20 states have moved their Medicaid dental services, in whole or part, to managed care. Less than half of all practicing dentists in the U.S. participate in a managed care network, which significantly reduces the number of dentists willing to take Medicaid clients.